

CANDIDATE'S ELECTION DAY EXPENDITURES REPORT

(to be filed by a candidate or his principal campaign committee)

This report is required to be filed by all candidates who are required to file campaign finance disclosure reports, **even if no election day expenditures were made**. The report is due not later than 10 days after the primary election, and, again, not later than 10 days after the general election if the candidate participates in the general election. This form is used to report payments by the candidate or his political committee (1) for advertising that is broadcast or published on election day (2) for the services of election day workers, and (3) to organizations for election day activities in support of the candidate. NOTE: This report is required **in addition** to all other required reports. Therefore, the expenditures reported on this report must be reported in subsequent

1. Qualifying Name and Address of Candidate

BARBARA NORTON
3542 Hollywood
Shreveport, LA 71108

2. Office Sought (Include title of office as well as parish, city, town and/or election district.)

State Representative
Caddo
3

OFFICE USE ONLY

Report Number: 27247

Date Filed: 11/2/2011

Report Includes Schedules:

Schedule A
Schedule B
Schedule C

3. Name and address of principal campaign committee

(Applicable only if candidate has a principal campaign committee)

4. Date of Election 10/22/2011

Primary ☒ General ☐ (Check one)

5. Total Expenditures by Category

| | |
|--|-------------------|
| a. Television Advertising (Schedule A) | <u>\$0.00</u> |
| b. Radio Advertising (Schedule A) | <u>\$900.00</u> |
| c. Newspaper Advertising (Schedule A) | <u>\$0.00</u> |
| d. Services of Election Day Workers (Schedule B) | <u>\$1,225.00</u> |
| e. Payments to Organizations for Election Day Activities/Services (Schedule C) | <u>\$1,240.00</u> |

For any category in which no election day expenditures were made, write -0- next to the category in Item 5. Any schedules not required to be completed may be omitted from this report.

6. a. Name of Person Preparing Report

b. Daytime Telephone

7. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that are required to be disclosed have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 2nd day of November, 2011.

Barbara Norton

Signature of Candidate/Chairperson (To be signed by Chairperson only if

3186325887

Daytime Telephone Number

Augustine Washington

Signature of Treasurer

3186313776

Daytime Telephone Number

SCHEDULE A: ADVERTISING

The following information must be provided for each person to whom an expenditure was made for the purchase of television, radio or newspaper advertising broadcast or published on election day. The total amount of such expenditures made to each recipient should be entered under Column 2. The type of advertising purchased should be checked in Column 3.

| 1. Name and Address of Recipient | 2. Amount Paid | 3. Type of Advertising |
|---|----------------|--|
| KOKA RADIO 208 N. Thomas Shreveport, LA 71107 | \$600.00 | <input type="checkbox"/> Television <input checked="" type="checkbox"/> Radio <input type="checkbox"/> Newspaper |
| KSYB RADIO 2807 Shreveport Blanchard Hwy Shreveport, LA 71107 | \$300.00 | <input type="checkbox"/> Television <input checked="" type="checkbox"/> Radio <input type="checkbox"/> Newspaper |

Form 104, Rev. 6/01, Page Rev. 3/98

SCHEDULE B: ELECTION DAY WORKERS

The following information must be provided for each individual to whom an expenditure was made for services performed on election day. Also, the information must be provided for each individual performing services on election day to whom a monetary expenditure was made by an organization to which a payment was made by the candidate completing this report. Such an organization is required by law to furnish this information to the candidate completing this report.

| 1. Name and Address of Recipient | 2. Amount Paid | 3. Organization Making Payment (if applicable) |
|---|----------------|--|
| FANNIE DIXION 5621 McAlpine Shreveport, LA 71109 | \$550.00 | |
| MICHAEL MCCRAY 4201 West Rachelle Las Vegas, NV 89103 | \$675.00 | |

Form 104, Rev. 6/01, Page Rev. 6/0

SCHEDULE C: PAYMENTS TO ORGANIZATIONS

The following information must be provided for each organization to which the candidate has made payments for any service(s) performed on election day.

| 1. Name and Address of Organization | 2. Amount Paid | 3. Purpose |
|---|----------------|------------|
| CLARION HOTEL 1419 E. 70th Shreveport, LA 71105 | \$1,240.00 | |

Form 104, Rev. 6/01, Page Rev. 3/98